

1-1-1945

Memoranda Book 169: Carey Hand Funeral Home records, January 1, 1945 to February 16, 1945

Carey Hand Funeral Home

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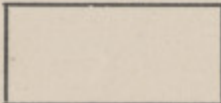
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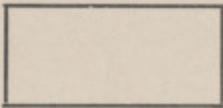
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Carey Hand Funeral Home

Name of Deceased Beatrice Money Lemneck
 Date of Death January 1 - 1945 A.M.
 Cause of Death Natural Causes - Fita
 Place of Death Orla Vista, Florida
 Residence Orla Vista, Florida
 Age 21 Y'rs 1 Mo's 8 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date January 4 1945 1:00 PM.
 Account Charged Margaret Riser
 Address 700 N. H. Grace - Union Park, Fla.
 Account Guaranteed Cash
 Address ✓
 Embalming + Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 4/3 Sgu. H.C. 30.00
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves 
 X Grave on This Date _____
 W
 Cremation Body Cremated 50.00
 Urn 8:00 A.M. Jan. 5 - 1945
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram Will Call
 Minister _____
 Music _____
 Casket Wagon (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

120.00

Carey Hand Funeral Home

Name of Deceased Grace Osborne Edwards
 Date of Death January 1-1945 3 P. M.
 Cause of Death Cerebral Hemorrhage
 Place of Death Res.
 Residence Albert Drive - Winter Park
 Age 23 Y'rs 1 Mo's 15 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at All Saints Church - Winter Park
 Date January 4 1945 11 A. M.
 Account Charged Ann K. Edwards
 Address South Shaftsbury, Vermont
 Account Guaranteed Estate
 Address ☒
 Embalming + Dressing 35 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Umpa 18 50
 Casket with Copper Lin. _____
 Style of Casket 4/3 Gr. Br. Q. S. H. C.
 No. of Casket 1850 150 00
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves 
 X Grave on This Date _____
 W
 Cremation Body Cremated 1/5/45 50 00
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister (1) 5 00
 Music _____
 Casket Wagon (1) 5 00
 Physician _____
 County or City Burial _____
 Automobiles S+S 15 00
 Baggage or Express Train No. _____

255 00

Carey Hand Funeral Home

Name of Deceased Florence Campbell
 Date of Death January 1-1945 P. M.
 Cause of Death Cardiac Arterial
 Place of Death Summerville Nursing Home
 Residence Cocoa, Florida
 Age 50 Y'rs Mo's Days
 Weight Height ft. in. Eyes
 Funeral at Port Lunden, New York
 Date Shipped January 3 1945 12:15 A.M.
 Account Charged Hawley George Campbell
 Address Cocoa, Florida
 Account Guaranteed Insurance
 Address
 Embalming & Dressing
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6/3 1/2 C. Sil. Emb. Pl.
 Casket with Copper Lin.
 Style of Casket
 No. of Casket Yampa - 1575
 Outside Box Reg.
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section Lot
 E
 I Other Graves
 N S
 X Grave on This Date
 W
 Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to Port Lunden, N.Y.
 R. R. Ticket (50⁰⁰ - 63⁰⁰ - 36⁰⁰ - 30⁰⁰)
 Cash Advanced Wed. 12:45 A.M.
 Autos Baggage
 Telegram
 Minister Hearse to Cocoa
 Music
 Casket Wagon (1)
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

35 00

225 00

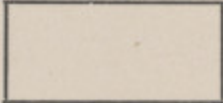
153 38

20 00

5 00

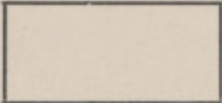
438.38

Carey Hand Funeral Home

Name of Deceased Ella Viola Williams
 Date of Death January 1-1945-7:30 P.M.
 Cause of Death Cancer of esophagus
 Place of Death Res.
 Residence Rt. 5-Box 537-Orlando, Florida
 Age 64 Y'rs 7 Mo's 7 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Marion, Ohio
 Date Shipped January 3 1945 2:18 P.M.
 Account Charged Dolga A. Williams
 Address Rt. 5-Box 537 Orlando, Fla.
 Account Guaranteed Check
 Address ✓
 Embalming + Dressing 35 00
 Robe, Suit, Dress 20 00
 Underwear and Hose _____
 Casket Solid Walnut - S.H.C.
 Casket with Copper Lin. Full View
 Style of Casket Tampa 600 750 00
 No. of Casket _____
 Outside Box Req.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves
 N  S
 X Grave on This Date _____ W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Marion, Ohio 239 50
 R. R. Ticket Baggage - Wed. Jan. 3-45
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

1054.50

Carey Hand Funeral Home

Name of Deceased Martin Earl Howard
 Date of Death arrived January 1-1945 M.
 Cause of Death Cardiac asthma
 Place of Death Winter Haven
 Residence Winter Haven, Florida
 Age 62 Y'rs 1 Mo's ✓ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Winter Haven, Fla.
 Date _____ 194 _____ M.
 Account Charged W. H. Smith Funeral Home
 Address Winter Haven, Florida
 Account Guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves 
 X Grave on This Date _____
 W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

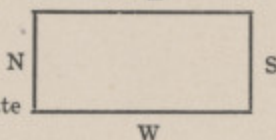
37.50

Carey Hand Funeral Home

Name of Deceased Lydia E. Schmitt
 Date of Death Arrived Jan. 2-1945 M.
 Cause of Death Chro-Mycocarditis
 Place of Death Wintley Haven, Florida
 Residence Haines City, Florida
 Age 63 Y'rs 10 Mo's 24 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Haines City, Florida
 Date _____ 194 _____ M.
 Account Charged Carey Hand Funeral Home
 Address Haines City, Florida
 Account Guaranteed _____
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on This Date

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

37.50

7

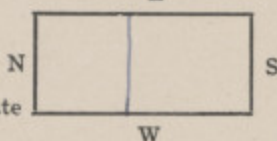
573.47

Carey Hand Funeral Home

Name of Deceased David C. Jewell
 Date of Death January 4 - 1945 4:05 A.M.
 Cause of Death Carcinoma of rectum
 Place of Death Orange General Hospital
 Residence 549 N. Orange Ave. - Orlando, Fla.
 Age 58 Y'rs - Mo's 10 Days -
 Weight - Height - ft. - in. Eyes -
 Funeral at Chapel
 Date January 6 1945 3:30 P.M.
 Account Charged Mrs. Elsie Jewell
 Address 549 N. Orange Ave. - Orlando, Fla.
 Account Guaranteed Estate
 Address -

Embalming & Dressing	35 00
Robe, Suit, Dress	
Underwear and Hose	
Casket <u>6/3 Gr. Br. Cl. H.C.</u>	
Casket with Copper Lin.	
Style of Casket	
No. of Casket <u>Walker 362</u>	325 00
Outside Box	
Shipping Case or Vault <u>Cement</u>	60 00
Handles	
Pillow Set	
Name Plate	
Cemetery <u>Greenwood</u>	
Section <u>N 1/2</u> <u>N</u> Lot <u>62</u>	

I Other Graves



X Grave on This Date

Cremation	
Urn	
Single Grave	
Opening and Closing Grave	15 00
Body Shipped to	
R. R. Ticket	
Cash Advanced	
Autos <u>(1) Family</u>	5 00
Telegram <u>(2) Pallbearers Cars</u>	10 00
Minister <u>(1)</u>	5 00
Music	
Casket Wagon <u>(1)</u>	5 00
Physician	
County or City Burial	
Automobiles <u>5 + 5</u>	15 00
Baggage or Express Train No.	

475.00

Carey Hand Funeral Home

Name of Deceased Ruby Louise Siler
 Date of Death January 5 - 1945 - 11:00 A.M.
 Cause of Death Enteritis with Convulsions
 Place of Death Res.
 Residence 3 1/2 mi. West of Apopka
 Age 6 Y's 5 Mo's 19 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Graceland
 Date January 7 1945 3 P.M.
 Account Charged Jake Siler
 Address Apopka, Florida
 Account Guaranteed Payments
 Address _____
 Embalming + Dressing 25.00
 Robe, Suit, Dress } 7.50
 Underwear and Hose }
 Casket 4/6 White Plush - Ext. H.C.
 Casket with Copper Lin.
 Style of Casket
 No. of Casket Janpa 150 65.00
 Outside Box Reg.
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery Apopka
 Section _____ Lot _____
 E
 I Other Graves
 N S
 X Grave on This Date _____ W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos Deliver Body to Res. 5.00
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

107.52

Carey Hand Funeral Home

Name of Deceased Walter Alan Thomas
 Date of Death January 5-1945 P. M.
 Cause of Death Cerebral Apoplexy
 Place of Death Florida Sanatorium
 Residence 1455 Westchester - Winter Park, Fla.
 Age 51 Y'rs 9 Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date January 7 1945 4 P. M.
 Account Charged Mrs. Carrie Thomas
 Address 1455 Westchester - Winter Park
 Account Guaranteed Estate
 Address _____
 Embalming + dressing 35 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket Walnut S.H.C.
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket Tampa 500 1200 00
 Outside Box _____
 Shipping Case or Vault Cement 60 00
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section N 1/2 N Lot 28
 AND S 1/2 N 21
 E
 I Other Graves _____
 N _____ S _____
 X Grave on This Date _____ W _____
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave 15 00
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos (1) 5 00
 Telegram _____
 Minister (1) 5 00
 Music yes 5 00
 Casket Wagon (1) 5 00
 Physician (2) Pullman Cars 10 00
 County or City Burial _____
 Automobiles S+S 15 00
 Baggage or Express Train No. _____

1355.00

Carey Hand Funeral Home

Name of Deceased <u>Frances Partin</u>	
Date of Death <u>January 6-1945</u> <u>4 P. M.</u>	
Cause of Death _____	
Place of Death <u>Orange General Hospital</u>	
Residence <u>R.R.# Orlando, Florida</u>	
Age <u>61</u> Y'rs <u>6</u> Mo's <u>21</u> Days _____	
Weight _____ Height _____ ft. _____ in. Eyes _____	
Funeral at <u>Chapel</u>	
Date <u>January 8</u> <u>1945</u> <u>4 P. M.</u>	
Account Charged <u>Harney Partin</u>	
Address <u>R.R.# Orlando, Fla.</u>	
Account Guaranteed <u>Cash</u>	
Address _____	
Embalming <u>+ dressing</u>	35 00
Robe, Suit, Dress <u>Pink Velvet</u>	20 00
Underwear and Hose _____	
Casket <u>6/3 Sil. Emb. Pl.</u>	
Casket with Copper Lin. _____	
Style of Casket _____	
No. of Casket <u>Tampa 15-25</u>	195 00
Outside Box <u>Reg.</u>	
Shipping Case or Vault _____	
Handles _____	
Pillow Set _____	
Name Plate _____	
Cemetery <u>Conway Cemetery</u>	
Section _____ Lot _____	
	E
I Other Graves _____	
	N S
X Grave on This Date _____	W
Cremation _____	
Urn _____	
Single Grave _____	
Opening and Closing Grave _____	15 00
Body Shipped to _____	
R. R. Ticket _____	
Cash Advanced _____	
Autos <u>(2) Family</u>	10 00
Telegram _____	5 00
Minister <u>+ Pallbearer</u>	
Music _____	
Casket Wagon <u>(1)</u>	5 00
Physician _____	
County or City Burial _____	
Automobiles <u>S+S</u>	15 00
Baggage or Express Train No. _____	
	300.00

Carey Hand Funeral Home

Name of Deceased Mrs. Jan. Warren
 Date of Death January 5 1945 6:00 P.M.
 Cause of Death Pneumonia
 Place of Death Florida Sanitarium
 Residence Pt. 2 Box 316F - Orlando, Fla.
 Age 4 Y'rs 4 Mo's 13 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date January 8 1945 2 P. M.
 Account Charged J. M. Warren
 Address Pt. 2 Box 316F - Orlando, Fla.
 Account Guaranteed Cash
 Address _____
 Embalming + dressing 35 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket White Plush
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket 1 85 00
 Outside Box Req.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Lake Hill Cemetery 10 00
 Section _____ Lot _____
 E
 I Other Graves _____
 N _____ S _____
 X Grave on This Date _____
 W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave 10 00
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos (1) 5 00
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (1) 5 00
 Physician _____
 County or City Burial _____
 Automobiles S & S 15 00
 Baggage or Express Train No. _____

165.00

Carey Hand Funeral Home

Name of Deceased Ella Brevington (Coloud)
 Date of Death January 4-1945 3 P. M.
 Cause of Death Acute myocardial failure
 Place of Death Preston Lake Camp
 Residence about 55 Yrs Mo's Days
 Age 55 Yrs Mo's Days
 Weight Height ft. in. Eyes
 Funeral at Graceland
 Date January 5 1945 A. M.
 Account Charged M. W. Lucas
 Address P.O. Box 1593 - Orlando, Fla.
 Account Guaranteed
 Address

Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6/3
 Casket with Copper Lin.
 Style of Casket
 No. of Casket
 Outside Box
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section _____ Lot _____

I Other Graves

N

E

S

X Grave on This Date

W

Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash Advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

14.50

14.50

Carey Hand Funeral Home

Name of Deceased Charles W. Denning
 Date of Death January 6-1945 12 P. M.
 Cause of Death _____
 Place of Death Res.
 Residence 232 Magnolia Ave. - Orlando, Fla.
 Age 75 Y'rs 11 Mo's 12 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date January 9 1945 P. M.
 Account Charged Lisa Denning
 Address 232 Magnolia - Orlando, Fla.
 Account Guaranteed Estate
 Address _____
 Embalming + dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Steel Gr. Plain Dec
 Casket with Copper Lin. H.C. 135.00
 Style of Casket _____
 No. of Casket _____
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section _____ Lot _____
 _____ E _____
 I Other Graves _____
 _____ N _____ S _____
 X Grave on This Date _____ W _____

 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister + Ballhaver 5.00
 Music _____
 Casket Wagon (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles S+S 15.00
 Baggage or Express Train No. _____

210.00

Carey Hand Funeral Home

Name of Deceased James F. Roddy
 Date of Death January 7-1945 7 P.M.
 Cause of Death Pneumonia
 Place of Death Residence
 Residence 512 E. Pine Street
 Age 57 Y'rs - Mo's 26 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date January 11 1945 4 P.M.
 Account Charged Mrs. Lora Glenn Roddy
 Address 512 E. Pine St. - Orlando, Fla.
 Account Guaranteed Estate + Gov. Allowance
 Address _____
 Embalming + Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Bu. Inc. H.C.
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket Tampa 31 200.00
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves
 N S
 X Grave on This Date _____ W
 Cremation Body Cremated 1/12/45 50.00
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos (2) 10.00
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

300.00

Cary Hand Funeral Home

Name of Deceased Harriet Glass List
 Date of Death January 7-1945 1 P.M.
 Cause of Death Acute Cardiac dilation
 Place of Death Florida Sanitarium
 Residence 321 New England Ave. - Winter Park
 Age 79 Y'rs 5 Mo's 20 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Residence - Winter Park
 Date January 9 1945 11 A.M.
 Account Charged Clyde C. Sues
 Address 210 E. 51st St. - New York, N.Y.
 Account Guaranteed _____

Address _____
 Embalming + dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 - Gv. Br. Cl. Oct. H.C.
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket Tampa 1850 150.00
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves

N

E

S

X Grave on This Date

W

Cremation Body Cremated 1/10/45 50.00
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos To Residence (S+S) 15.00
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

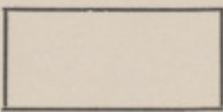
255.00

Carey Hand Funeral Home

Name of Deceased Charles N. Vigneron
 Date of Death January 9-1945 A.M.
 Cause of Death Terminal Broncho Pneumonia
 Place of Death Amburst Apts. - Orlando, Fla.
 Residence Amburst Apts. - Orlando, Fla.
 Age 81 Y'rs 6 Mo's 22 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Family Room - (Private)
 Date January 11 1945 3:30 P.M.
 Account Charged Mrs. Janet H. Vigneron
 Address Amburst Apts. - Orlando, Fla.
 Account Guaranteed Estate
 Address _____
 Embalming + dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Walnut Stata
 Casket with Copper Lin. N.C.
 Style of Casket _____
 No. of Casket Single 1200.00
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery In Vault
 Section _____ Lot _____
 I Other Graves _____
 X Grave on This Date _____
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos (1) 5.00
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (2) 10.00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

1250.00

Carey Hand Funeral Home

Name of Deceased Manzell A. Jackson
 Date of Death January 9-1945 8:45 AM.
 Cause of Death Heart Attack
 Place of Death Statima Hotel - Orlando, Fla.
 Residence 224 Craig - Clarkburg, W. Va.
 Age 87 Y'rs 1 Mo's 1 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Destination (via Express)
 Date Shipped - January 10 1945 P. M.
 Account Charged Cassidy & Finkle Funeral Home
 Address Alliance, Ohio
 Account Guaranteed Western Union Check
 Address _____
 Embalming & dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Gr. Dec - H. C.
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket 71 125.00
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves 
 X Grave on This Date _____
 W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket Express 84.20
 Cash Advanced _____
 Autos _____
 Telegram (1) 1.34
 Minister L. D. Telephone 4.96
 Music _____
 Casket Wagon (2) 10.00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

260.50

Carey Hand Funeral Home

Name of Deceased Mrs. Georgie S. Locke
 Date of Death January 8-1945 M.
 Cause of Death Not given on removal permit
 Place of Death Res. Gulfport, Florida
 Residence Gulfport, Florida
 Age 80 Y'rs 11 Mo's 3 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Gulfport, Florida
 Date _____ 194 _____ M.
 Account Charged Cookman, Inc.
 Address St. Petersburg, Florida
 Account Guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves
N
S

 X Grave on This Date
W

 Cremation Body Cremated 1/14/45 37.50
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of Deceased Emily Benson Wilcox
 Date of Death arrived - January 9-1945 3:45 P. M.
 Cause of Death not given on removal permit
 Place of Death Jacksonville, Florida
 Residence Jacksonville, Florida
 Age _____ Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Jacksonville, Florida
 Date _____ 194 _____ M.
 Account Charged S. A. Kyle Funeral Home
 Address Jacksonville, Florida
 Account Guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 N S
 X Grave on This Date _____
 W
 Cremation Cremated 1/10/45
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

37.50

Carey Hand Funeral Home

Name of Deceased Ella H. Dunham
 Date of Death January 9-1945 1:11 P. M.
 Cause of Death Cerebral Hemorrhage
 Place of Death O. S. H. Orlando, Fla.
 Residence St. 2-Box 143-B - Orlando, Fla.
 Age 81 Y'rs 9 Mo's 2 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date January 12 194 5 4:00 P. M.
 Account Charged Mrs. Ethel M. Smith
 Address St 2-Box 143 - Orlando, Fla.
 Account Guaranteed Estate
 Address _____

Embalming + Dressing 35 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Gl. Spr. 50 00
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves _____
 X Grave on This Date _____

N

E
W
S

S

Cremation Body Cremated 1/14/45 50 00
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

125.00

Carey Hand Funeral Home

Name of Deceased Oscar Wayne Odum
 Date of Death January 10-1945 1:10 P.M.
 Cause of Death Pneumonia
 Place of Death Ocala, Florida
 Residence Ocala, Florida
 Age — Y'rs 3 Mo's 13 Days —
 Weight — Height — ft. — in. Eyes —
 Funeral at Shanewise
 Date January 12 1945 2:30 P.M.
 Account Charged Russell J. Odum
 Address Ocala, Florida
 Account Guaranteed Payments
 Address —
 Embalming +/-
 Robe, Suit, Dress —
 Underwear and Hose —
 Casket 2/0 White Doebsin
 Casket with Copper Lin. —
 Style of Casket —
 No. of Casket Tampa 103-2/0 23 50
 Outside Box —
 Shipping Case or Vault Cement 30 00
 Handles —
 Pillow Set —
 Name Plate —
 Cemetery Ocala Cemetery
 Section — Lot —
 E
 I Other Graves —
 N — S —
 X Grave on This Date — W —
 Cremation —
 Urn —
 Single Grave —
 Opening and Closing Grave ✓ 7 50
 Body Shipped to —
 R. R. Ticket —
 Cash Advanced —
 Autos (1) 5 00
 Telegram —
 Minister —
 Music —
 Casket Wagon —
 Physician —
 County or City Burial —
 Automobiles —
 Baggage or Express Train No. —

66 00

Carey Hand Funeral Home

Name of Deceased John Wesley Gainer
 Date of Death January 10-1945 3:30 P.M.
 Cause of Death Pulmonary Tuberculosis
 Place of Death Orange County J.B. Unit
 Residence Pt. 5-Box 50 - Orlando, Fla.
 Age 55 Y'rs 9 Mo's 20 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Graveside - Lake Butler, Fla.
 Date January 14 1945 2 P.M.
 Account Charged _____
 Address _____
 Account Guaranteed Estate (Insurance)
 Address _____
 Embalming + dressing 95⁰⁰
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Gv. Cl - Oct. H.C.
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket Imperial 135⁰⁰
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Lake Butler
 Section _____ Lot _____
 E
 I Other Graves N S
 X Grave on This Date W
 Cremation _____
 Urn _____
 Single Grave Dwight C. Jones
 Opening and Closing Grave Funeral Home
 Body Shipped to Starke, Fla. 57⁵⁰
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (2) 10⁰⁰
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

237.50

Carey Hand Funeral Home

Name of Deceased James Russell Marshall Jr.
 Date of Death January 10-1945 7:45 P. M.
 Cause of Death Motorcycle accident
 Place of Death O. G. H.
 Residence 2320 N. Stuart - Richmond, Va.
 Age 19 Y'rs - Mo's 17 Days
 Weight - Height - ft. - in. Eyes -
 Funeral at Dart
 Date Shipped - January 11 1945 M.
 Account Charged -
 Address -
 Account Guaranteed Check
 Address -
 Embalming + dressing 35.00
 Robe, Suit, Dress -
 Underwear and Hose ✓ 2.00
 Casket 6/3 Gr. Cl.
 Casket with Copper Lin. -
 Style of Casket Gampa 90.00
 No. of Casket Reg.
 Outside Box -
 Shipping Case or Vault -
 Handles -
 Pillow Set -
 Name Plate -
 Cemetery -
 Section - Lot -
 E
 I Other Graves -
 N - S
 X Grave on This Date - W
 Cremation -
 Urn (2) Certified Copies 1.00
 Single Grave -
 Opening and Closing Grave -
 Body Shipped to -
 R. R. Ticket Express to Richmond 55.74
 Cash Advanced -
 Autos -
 Telegram ✓ (phone) 5.00
 Minister -
 Music Ord. to O. G. H. 15.00
 Casket Wagon (2) 10.00
 Physician -
 County or City Burial -
 Automobiles -
 Baggage or Express Train No. -

213.74

Carey Hand Funeral Home

Name of Deceased <u>Jennie L. Newton</u>		
Date of Death <u>January 13-1945</u>	<u>4:45 P.M.</u>	
Cause of Death <u>Leukemia</u>		
Place of Death <u>107 Hennick Dr. - Orlando, Fla.</u>		
Residence <u>Krester Nursing Home</u>		
Age <u>91</u>	Y'rs <u>1</u>	Mo's <u>28</u> Days
Weight	Height	ft. in. Eyes
Funeral at <u>Chapel</u>		
Date <u>January 15</u>	<u>1945</u>	<u>4 P. M.</u>
Account Charged <u>Mrs. Marion E. Buck</u>		
Address <u>2600 S. Wm. Webb - Orlando, Fla.</u>		
Account Guaranteed <u>Postal Savings</u>		
Address		
Embalming <u>+ dressing</u>		35.00
Robe, Suit, Dress		
Underwear and Hose		
Casket <u>4/3 Sil. Doe H.C.</u>		
Casket with Copper Lin.		
Style of Casket <u>Simple</u>		130.00
No. of Casket		
Outside Box <u>Reg.</u>		
Shipping Case or Vault		
Handles		
Pillow Set		
Name Plate		
Cemetery <u>Greenwood</u>		
Section	Lot	
	E	
I Other Graves	<div style="border: 1px solid black; width: 150px; height: 50px; margin: 0 auto; position: relative;"> N S </div>	
X Grave on This Date	W	
Cremation		
Urn		
Single Grave		
Opening and Closing Grave <input checked="" type="checkbox"/>		15.00
Body Shipped to		
R. R. Ticket		
Cash Advanced		
Autos		
Telegram		
Minister		
Music		
Casket Wagon <u>(1)</u>		5.00
Physician		
County or City Burial		
Automobiles <u>S+S</u>		15.00
Baggage or Express Train No.		
		200.00

Carey Hand Funeral Home

Name of Deceased Rev. Roy B. Guild D.D.
 Date of Death January 13 - 1945 10 P. M.
 Cause of Death Choreaephritis - Uremia
 Place of Death O. H. H.
 Residence 333 Victoria Ave. - Winter Park
 Age 74 Y'rs 1 Mo's 10 Days
 Weight _____ Height _____ ft, _____ in. Eyes _____
 Funeral at Congregational Church
 Date January 14 1945 3 P. M.
 Account Charged Winifred E. Guild
 Address Winter Park, Fla.
 Account Guaranteed Cash
 Address _____
 Embalming + dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Gr. Pl. H.C. 7.1.
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket 70 Tampa 90.00
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves N S
 X Grave on This Date _____ W
 Cremation Body Cremated 1/16/45 50.00
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____
180.00

Carry Hand Funeral Home

Name of Deceased Harmon Clinton Rice, Jr.
 Date of Death January 13-1945 12:30 P.M.
 Cause of Death Accidental drowning
 Place of Death Lake Eola
 Residence 318 E. Livingston - Orlando, Fla.
 Age 9 Y'rs 3 Mo's 15 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at St. James Catholic Church
 Date January 17 1945 10:30 A.M.
 Account Charged Harmon C. Rice, Jr.
 Address 318 E. Livingston - Orlando, Fla.
 Account Guaranteed Cash

Address _____
 Embalming + dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 4/6 white Plush Oct.
 Casket with Copper Lin. Full H.C.
 Style of Casket _____
 No. of Casket 103 Tampa 85.00
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section N 1/2 8 Blk. 14 Lot 9

E

I Other Graves

N

S

X Grave on This Date

W

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave ☒ 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced 1 ent. copy 50
 Autos _____
 Telegram _____
 Minister (1) 5.00
 Music (1) Ballroom Car 5.00
 Casket Wagon (1) 5.00
 Physician (1) Family Car 5.00
 County or City Burial _____
 Automobiles S+S 15.00
 Baggage or Express Train No. _____

170.50

Name of Deceased Lena E. Van Duzon
Date of Death January 14-1945 11 P. M.
Cause of Death Cardiac degeneration
Place of Death Fla. San.
Residence 714 S. Mills St - Orlando, Fla.
Age 73 Y'rs 7 Mo's 3 Days
Weight _____ Height _____ ft. _____ in. Eyes _____
Funeral at Chapel
Date January 17 1945 3 P. M.
Account Charged N.K. Van Duzon
Address 3514 Washington St. - Dickshurg, Miss
Account Guaranteed Estate
Address _____

Embalming + dressing 35.00

Robe, Suit, Dress _____

Underwear and Hose _____

Casket 6/3 Bu Pl. Bredeate

Casket with Copper Lin. L.C.

Style of Casket _____

No. of Casket Impa 185.00

Outside Box Reg.

Shipping Case or Vault _____

Handles _____

Pillow Set _____

Name Plate _____

Cemetery _____

Section _____ Lot _____

E

I Other Graves

N

S

X Grave on This Date

W

Cremation Body Cremated 1/18/45 50.00

Urn _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to _____

R. R. Ticket _____

Cash Advanced _____

Autos _____

Telegram _____

Minister _____

Music _____

Casket Wagon (1) 5.00

Physician _____

County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

225.00

Carey Hand Funeral Home

Name of Deceased Mary Louise Heldmyer
 Date of Death January 14 - 1945 2 P. M.
 Cause of Death Cerebral Thrombosis
 Place of Death O. H. St.
 Residence Hampton St. - Orlando, Fla.
 Age 72 Y'rs 6 Mo's 3 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at St. James Catholic Church
 Date January 17 1945 9 A. M.
 Account Charged Bro. E. R. Jones
 Address St. 5 - Box 799 - Orlando, Fla.
 Account Guaranteed _____
 Address _____

Embalming <u>+ dressing</u>	35.00
Robe, Suit, Dress	
Underwear and Hose	
Casket <u>6/3 Ev. Doe Oct. H.C.</u>	
Casket with Copper Lin.	
Style of Casket	
No. of Casket <u>1922 Tampa</u>	135.00
Outside Box	
Shipping Case or Vault	
Handles	
Pillow Set	
Name Plate	
Cemetery <u>Palm Cemetery</u>	
Section _____ Lot _____	

I Other Graves _____

N

E
W
S

S

 X Grave on This Date _____

Cremation	
Urn	
Single Grave	
Opening and Closing Grave <input checked="" type="checkbox"/>	15.00
Body Shipped to	
R. R. Ticket	
Cash Advanced	
Autos <u>(1) Family</u>	5.00
Telegram	
Minister <u>+ Pallbearer Car</u>	5.00
Music	
Casket Wagon <u>(1)</u>	5.00
Physician	
County or City Burial	
Automobiles <u>5+S</u>	15.00
Baggage or Express Train No.	

215.00

Carey Hand Funeral Home

Name of Deceased Simon Benjamin Hull
 Date of Death January 15-1945 1:15 P.M.
 Cause of Death Natural Causes - Bad Heart
 Place of Death Oakland, Fla.
 Residence Oakland, Fla.
 Age 77 Y'rs 8 Mo's 28 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date January 18 1945 P.M.
 Account Charged Mrs. S. B. Hull
 Address Oakland, Florida
 Account Guaranteed Estate
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Solid Mahogany State H.C.
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket Janpa 975.00
 Outside Box Cement 60.00
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section A Lot 128

E

 I Other Graves

N X S
 W

 X Grave on This Date _____

W

 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave ☒ 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos (2) Pullman Cars 10.00
 Telegram (1) Car 5.00
 Minister (1) Car 5.00
 Music _____
 Casket Wagon (1) Family Car 5.00
 Physician (1) Family Car 5.00
 County or City Burial _____
 Automobiles S & B 15.00
 Baggage or Express Train No. _____

1125.00

Name of Deceased Andrew Rachel
 Date of Death January 15-1945 5 A.M.
 Cause of Death Uremia - Diabetes
 Place of Death Andrews Dressing Home
 Residence Orange City, Florida
 Age 35 Y's Mo's Days
 Weight Height ft. in. Eyes
 Funeral at Massillon, Ohio
 Date Shipped January 16 1945 A.M.
 Account Charged Ernest Hangerford
 Address Box 67 - Ocala, Florida
 Account Guaranteed Estate
 Address (H. N. Vanables, Atty.)
 Embalming + dressing 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6/3 Du.R.v.Cl. H.C.
 Casket with Copper Lin.
 Style of Casket
 No. of Casket Impa 48 250.00
 Outside Box Red
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section Lot
E
 I Other Graves
N S
 X Grave on This Date W
 Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket Expressed Collect to
 Cash Advanced Massillon, Ohio
 Autos
 Telegram
 Minister
 Music
 Casket Wagon (2) 10.00
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

295.00

Name of Deceased William C. Schultz
 Date of Death January 15-1945 8 A. M.
 Cause of Death Heart attack
 Place of Death Taylor Hotel - Orlando, Fla.
 Residence 109 Clinton St. - Salamanca, N.Y.
 Age 72 Y's - Mo's 2 Days -
 Weight - Height - ft. - in. Eyes -
 Funeral at Destination
 Date Shipped Jan. 16 1945 A.M.
 Account Charged O'Rourke + O'Rourke
 Address Salamanca, New York - Funeral Home
 Account Guaranteed Western Union Draft
 Address -

Embalming + dressing 35.00

Robe, Suit, Dress -

Underwear and Hose -

Casket 6/3 Sq. H.C. Grey

Casket with Copper Lin. -

Style of Casket -

No. of Casket 71 Tampa 125.00

Outside Box Reg.

Shipping Case or Vault -

Handles -

Pillow Set -

Name Plate -

Cemetery -

Section - Lot -

E

I Other Graves

N

S

X Grave on This Date

W

Cremation -

Urn -

Single Grave -

Opening and Closing Grave -

Body Shipped to Salamanca, N.Y.

R. R. Ticket Express Collect

Cash Advanced -

Autos -

Telegram (telephone) 5.00

Minister -

Music -

Casket Wagon (2) 10.00

Physician -

County or City Burial -

Automobiles 1 Certified Copy .50

Baggage or Express Train No. -

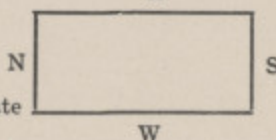
175.50

Carey Hand Funeral Home

Name of Deceased Clarence W. Brantley, Jr.
 Date of Death Arrived - January 15 - 1945 M.
 Cause of Death Accidentally Killed in House
 Place of Death Lands Ford, South Carolina
 Residence Lands Ford, South Carolina
 Age 44 Y'rs Mo's Days
 Weight Height ft. in. Eyes Funeral at Private in Family Room
 Date January 17 1945 3:30 P. M.
 Account Charged Mrs. Susan Brantley
 Address Orlando, Florida
 Account Guaranteed Check
 Address _____

Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____

I Other Graves



X Grave on This Date

Cremation Body Cremated 1/17/45
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced Personal Services
 Autos Spray of Flowers
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (1)
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

50.00

10.00
4.50

5.00

69.50

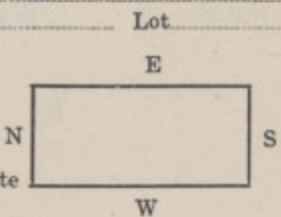
Name of Deceased John W. Zarulva
 Date of Death January 16-1945 12:20 P. M.
 Cause of Death Chro Myocarditis
 Place of Death State - I. B. Hospital
 Residence 115 E. 18th St. - Jacksonville, Fla.
 Age 37 Y'rs 4 Mo's 0 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Destination
 Date Shipped - January 17 1945 1:55 A. M.
 Account Charged Standard & Sons
 Address Jacksonville, Fla
 Account Guaranteed Check
 Address _____
 Embalming + Dressing 95.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 In. Cl. Sgu. 7. Lp 55.00
 Casket with Copper Lin. _____
 Style of Casket Reg.
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves
 N S
 W
 X Grave on This Date _____
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket Express 9.95
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (2) 10.00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

109.95

Name of Deceased Mrs. Kittie Wray
Date of Death January 15 - 1945 6:25 A.M.
Cause of Death Not given on permit
Place of Death State Hospital - Chattahoochee
Residence Lake Worth, Florida
Age 29 Y'rs 2 Mo's 29 Days
Weight _____ Height _____ ft. _____ in. Eyes _____
Funeral at _____
Date _____ 194 _____ M.
Account Charged Myzrell-Simon
Address West Palm Beach, Florida
Account Guaranteed Check
Address _____

Embalming _____
Robe, Suit, Dress _____
Underwear and Hose _____
Casket _____
Casket with Copper Lin. _____
Style of Casket _____
No. of Casket _____
Outside Box _____
Shipping Case or Vault _____
Handles _____
Pillow Set _____
Name Plate _____
Cemetery _____
Section _____ Lot _____

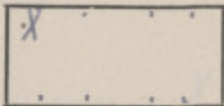
I Other Graves



X Grave on This Date

Cremation Body Cremated 1/18/45 37.50
Urn _____
Single Grave _____
Opening and Closing Grave _____
Body Shipped to _____
R. R. Ticket _____
Cash Advanced _____
Autos _____
Telegram _____
Minister _____
Music _____
Casket Wagon _____
Physician _____
County or City Burial _____
Automobiles _____
Baggage or Express Train No. _____

37.50

Name of Deceased Kenna Fries
 Date of Death January 16-1945 1:45 P. M.
 Cause of Death _____
 Place of Death 1023 E. Livingston - Orlando, Fla.
 Residence 1023 E. Livingston - Orlando, Fla.
 Age 77 Y'rs 2 Mo's 16 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at St. Luke Episcopal Church
 Date January 20 1945 2:30 P. M.
 Account Charged Estate
 Address _____
 Account Guaranteed Estate
 Address _____
 Embalming + dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Du. Cl. Oct. H.C.
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket 1922 - Tampa 135.00
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood Cemetery
 Section 8 N 1/2 Lot 95
 E
 I Other Graves 
 X Grave on This Date _____
 W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave ✓ 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos 2 Pullman 10.00
 Telegram (1) 5.00
 Minister (1)
 Music _____
 Casket Wagon (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles S+S 15.00
 Baggage or Express Train No. _____
 220.00

Carey Hand Funeral Home

Name of Deceased <u>William C. Tucker</u>		
Date of Death <u>January 16-1945</u>	<u>P. M.</u>	
Cause of Death <u>Hemorrhage</u>		
Place of Death <u>Cov. Robinson & Hwy St.</u>		
Residence <u>Lockhart, Florida</u>		
Age <u>46</u> Y'rs <u>7</u> Mo's <u>1</u> Days		
Weight _____ Height _____ ft. _____ in.	Eyes _____	
Funeral at <u>Chapel</u>		
Date <u>January 20</u> 1945	<u>4 P. M.</u>	
Account Charged <u>Annie Mae Tucker</u>		
Address <u>Lockhart, Florida</u>		
Account Guaranteed <u>L. L. Peterson</u>		
Address <u>116 N. Hwy - Orlando, Fla.</u>		
Embalming <u>+ dressing</u>		35 00
Robe, Suit, Dress <u>Blue Suit</u>		12 50
Underwear and Hose		
Casket <u>6/3 H. Dk. Oak. H.C.</u>		
Casket with Copper Lin.		
Style of Casket		
No. of Casket <u>1932 - Tampa</u>		135 00
Outside Box <u>Req.</u>		
Shipping Case or Vault		
Handles		
Pillow Set		
Name Plate		
Cemetery <u>Greenwood</u>		
Section <u>8</u>	Lot <u>139</u>	
E		
I Other Graves	<div style="border: 1px solid black; width: 150px; height: 50px; position: relative; margin: 0 auto;"> N S W X </div>	
X Grave on This Date		
W		
Cremation		
Urn		
Single Grave		
Opening and Closing Grave <input checked="" type="checkbox"/>		15 00
Body Shipped to		
R. R. Ticket		
Cash Advanced		
Autos <u>(2) Family Cars</u>		10 00
Telegram <u>(2) Pallbearers Cars</u>		10 00
Minister		
Music		
Casket Wagon <u>(1)</u>		5 00
Physician		3 50
County or City Burial <u>10 Photos</u>		
Automobiles <u>S & S</u>		15 00
Baggage or Express Train No.		

241.00

Carey Hand Funeral Home

Name of Deceased Allert Dent Forney
 Date of Death January 17, 1945 8:45 A.M.
 Cause of Death Heart attack
 Place of Death Bunbury Road
 Residence 1631 Hillcrest Ave. - Orlando, Fla.
 Age 76 Y'rs 11 Mo's 17 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date January 19-1 1945 3:30 P. M.
 Account Charged Mrs. Emma Forney
 Address 1631 Hillcrest - Orlando, Fla.
 Account Guaranteed Payments
 Address _____
 Embalming + dressing 35 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Sh. Cl. Oct. X. Cap
 Casket with Copper Lin. _____
 Style of Casket _____ 135 00
 No. of Casket Tampa
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Woodlawn
 Section _____ Lot _____

E

 I Other Graves

N

S

W

 X Grave on This Date _____

W

 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc. 15 00
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos (1) 5 00
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (1) 5 00
 Physician _____
 County or City Burial _____
 Automobiles S+S 15 00
 Baggage or Express Train No. _____

210.00

Carey Hand Funeral Home

Name of Deceased Robert Lee Braddy
 Date of Death January 15-1945 4:15 P.M.
 Cause of Death Concussion of brain - Train hit Auto
 Place of Death Staines City, Florida
 Residence Pt. 3 Box 180 - Orlando, Florida
 Age 49 Y'rs 6 Mo's 29 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Church of God
 Date January 20 1945 10:30 P.M.
 Account Charged Exp. Luella Braddy
 Address Pt. 3 - Box 180 - Orlando, Florida
 Account Guaranteed Insurance
 Address _____

Embalming _____
 Robe, Suit, Dress Shirt + Tie 3 50
 Underwear and Hose _____
 Casket 6/3 Grey H.C. State
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket 48 Tampa 275 00
 Outside Box 029
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Uvalde, Georgia
 Section _____ Lot _____

I Other Graves

N

S

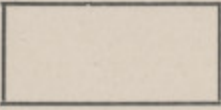
X Grave on This Date

W

Cremation _____
 Urn spray 5 00
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced Cash pd. to Lane Funeral
 Autos None for Embalming + delivery 50 00
 Telegram body to Orlando
 Minister _____
 Music _____
 Casket Wagon House to Uvalde, Ga. 125 00
 Physician _____
 County or City Burial _____
 Automobiles S.S. to Church 15 00
 Baggage or Express Train No. _____

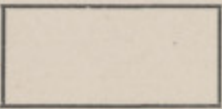
473.50

Carey Hand Funeral Home

Name of Deceased William Manning Ford
 Date of Death January 12-1945 5 A. M.
 Cause of Death Valvular Heart disease
 Place of Death Mount Dora, Florida
 Residence Mount Dora, Florida
 Age 68 Y'rs — Mo's 4 Days
 Weight — Height — ft. — in. Eyes —
 Funeral at Chapel
 Date January 19 1945 2:30 P. M.
 Account Charged Mrs. Emily E. Ford
 Address Mount Dora, Florida
 Account Guaranteed Estate
 Address —
 Embalming + dressing 35 00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6/2 H. B. Co. State
 Casket with Copper Lin.
 Style of Casket
 No. of Casket 48 - Tampa 275 00
 Outside Box
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section Lot
 E
 I Other Graves
 N  S
 X Grave on This Date W
 Cremation Body Cremated 1/20/45 50 00
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash Advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon (1) 5 00
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

365 00

Carey Hand Funeral Home

Name of Deceased Frank W. Dunning
 Date of Death January 18, 1945 2 A. M.
 Cause of Death Coronary Thrombosis
 Place of Death Residence
 Residence 2061 Glenwood Dr. - Winter Park, Fla.
 Age 87 Y'rs 8 Mo's 28 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at No Services
 Date _____ 194 _____ M.
 Account Charged Mrs. Frances D. Rathburn
 Address 2061 Glenwood Dr. - Winter Park, Fla.
 Account Guaranteed Check
 Address _____
 Embalming + Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 H. L. L. G. W. C. 75.00
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves 
 X Grave on This Date _____ W
 Cremation Body Cremated - 1/21/45 50.00
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

165.00

Carey Hand Funeral Home

Name of Deceased Lorenz Benoni Webb
 Date of Death January 14-1945 M.
 Cause of Death Internal Hemorrhage
 Place of Death Eustis, Florida
 Residence Mount Dora, Florida
 Age 84 Y'rs 11 Mo's 1 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M.
 Account Charged Behbaum & Co.
 Address Mount Dora, Florida
 Account Guaranteed Check
 Address _____
 Embalming Arrived - Jan. 17-1945
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 N _____ S _____
 X Grave on This Date _____ W _____
 Cremation Body Cremated - 1/18/45 37.50
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of Deceased E. Alden Converse
 Date of Death January 20-1945 P. M.
 Cause of Death Chronic Myocarditis
 Place of Death P. H. H.
 Residence 146 S. Clayton St. - Mount Dora, Fla.
 Age 21 Y'rs 1 Mo's 3 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at No Service
 Date _____ 194 _____ M.
 Account Charged Rehbaum & Co.
 Address Mount Dora, Florida
 Account Guaranteed _____
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves N S
 X Grave on This Date W
 Cremation Body Cremated 1/23/45 50.00
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of Deceased Fredrick Webb Rodgers
 Date of Death January 21-1945 12-noon M.
 Cause of Death Not given on permit
 Place of Death St. Petersburg, Florida
 Residence St. Petersburg, Fla.
 Age 68 Y's 6 Mo's 5 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M.
 Account Charged Casper, Inc.
 Address St. Petersburg, Florida
 Account Guaranteed Ch. B.
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 N S
 X Grave on This Date _____ W
 Cremation Body Cremated 1/22/45 37 50
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of Deceased Velma P. Jenness
 Date of Death January 18-1945 9:45 P.M.
 Cause of Death Central Hemorrhage
 Place of Death Home
 Residence 1851 Cornell Ave. - Winter Park, Fla.
 Age 74 Y'rs - Mo's 10 Days
 Weight - Height - ft. - in. Eyes -
 Funeral at Chapel
 Date January 21 1945 4:00 P. M.
 Account Charged Dean A.D. Export
 Address Bellini College - Orlando, Fla.
 Account Guaranteed Estate
 Address -
 Embalming + dressing 35.00
 Robe, Suit, Dress
 Underwear and Hose
 Casket 6/3 Br. Casket 55.00
 Casket with Copper Lin.
 Style of Casket
 No. of Casket
 Outside Box
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section - Lot -
 E
 I Other Graves
 N - S
 W
 X Grave on This Date
 Cremation Body Cremated 1/22/45 50.00
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash Advanced 2 Certified Copies 1.00
 Autos
 Telegram
 Minister
 Music
 Casket Wagon (1) 5.00
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

146.00

Carey Hand Funeral Home

Name of Deceased Robert William Bishop
 Date of Death January 21-1945 Noon M.
 Cause of Death Crushed between pole + smoke stack
 Place of Death Pinelock Ave. - Southern Hunt Dist. Co.
 Residence 1906 Jewell Ave. - Winter Park, Fla.
 Age 29 Y'rs 7 Mo's 21 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Bradenton, Florida
 Date January 21 1945 M.
 Account Charged _____
 Address _____
 Account Guaranteed _____
 Address _____
 Embalming + Dressing 50.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves N S
 X Grave on This Date W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket Griffith-Kline came
 Cash Advanced after the body + took
 Autos it to Bradenton, Fla. for
 Telegram arrangements + burial.
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

50.00

47

Carey Hand Funeral Home

Name of Deceased Palmer John Edford
 Date of Death January 22 1945 P. M.
 Cause of Death Not given on permit
 Place of Death Lake Hamilton, Florida
 Residence Lake Hamilton, Florida
 Age 64 Y'rs 10 Mo's 2 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M.
 Account Charged Lane Funeral Home
 Address Haines City, Florida
 Account Guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 N _____ S _____
 X Grave on This Date _____ W _____
 Cremation Body Cremated 1/22/45 37.50
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of Deceased Louisa Virginia Thainright
 Date of Death January 23-1945 12:30 P.M.
 Cause of Death Cardio Thrombosis - Old age
 Place of Death Apopka
 Residence Box 555 - Apopka, Fla.
 Age 91 Y'rs 3 Mo's 24 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date January 25 1945 11 A.M.
 Account Charged Mrs. W. H. Stephens
 Address Box 426 - Apopka, Fla.
 Account Guaranteed Estate
 Address _____
 Embalming + dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Oct. H. C. Steel Co. Br. Cl.
 Casket with Copper Lin. metal
 Style of Casket _____
 No. of Casket 1575 - Tampa 425.00
 Outside Box _____
 Shipping Case or Vault ✓ 60.00
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Apopka Cemetery
 Section _____ Lot _____
 E
 I Other Graves _____
 N S
 X Grave on This Date _____ W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc. 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos (2) Family Cars 10.00
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles S. + S. 15.00
 Baggage or Express Train No. _____
565.00

Carey Hand Funeral Home

Name of Deceased Armenta, Pearl Horne
 Date of Death January 23-1945 11:50 AM.
 Cause of Death Broncho Pneumonia
 Place of Death Wilcox Nursing Home
 Residence Plymouth, Florida
 Age 71 Yrs. 5 Mo's - Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Granside
 Date January 26 1945 2 P. M.
 Account Charged Bay Horne
 Address Plymouth, Fla. P.O. Box 11
 Account Guaranteed Payments
 Address _____
 Embalming + dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 4/3 Dr. L. L. Sq. D.C.
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket Tampa 100.00
 Outside Box Box
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Bay Ridge Cemetery
 Section _____ Lot _____
 E
 I Other Graves _____
 N _____ S _____
 X Grave on This Date _____
 W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave, etc. 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles S. & S. 15.00
 Baggage or Express Train No. _____
 170.00

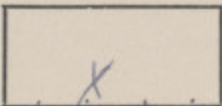
50

Carey Hand Funeral Home

Name of Deceased	Mary A. Seatto		
Date of Death	January 23-1945	2 P. M.	
Cause of Death	Cerebral Hemorrhage		
Place of Death	County Home		
Residence	County Home		
Age	81	Y'rs	11 Mo's 3 Days
Weight		Height	ft. in. Eyes
Funeral at	Chapel		
Date	January 28	1945 2 P. M.	
Account Charged	Bethany Kenned		
Address	Sanford, Florida		
Account Guaranteed	Pearl Barnes		
Address	P.O. Box 49 - Longwood, Fla.		
Embalming & Dressing			35.00
Robe, Suit, Dress	White		7.50
Underwear and Hose			
Casket	4/3 Br. Cl. Sgr. W.C.		
Casket with Copper Lin.			
Style of Casket			
No. of Casket	71 - Tampa		100.00
Outside Box	Reg.		
Shipping Case or Vault			
Handles			
Pillow Set			
Name Plate			
Cemetery	Conway		
Section		Lot	
		E	
I Other Graves			
	N		S
X Grave on This Date			
		W	
Cremation			
Urn			
Single Grave			
Opening and Closing Grave, etc.			15.00
Body Shipped to			
R. R. Ticket			
Cash Advanced			
Autos			
Telegram			
Minister			
Music			
Casket Wagon			
Physician			
County or City Burial			
Automobiles	S & S		15.00
Baggage or Express Train No.			
			150.00

Name of Deceased John Dale Denton
 Date of Death January 25-1945 8 P. M.
 Cause of Death As result of Auto accident
 Place of Death O. E. H.
 Residence 1159 N. Orange Ave. - Orlando, Fla.
 Age 26 Y'rs 8 Mo's 21 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date January 26 1945 10 A.M.
 Account Charged Mrs. Betty Denton
 Address 1159 Orange Ave. - Orlando
 Account Guaranteed Insurance
 Address _____
 Embalming + dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 - Bu. Br. cl.
 Casket with Copper Lin. _____
 Style of Casket 1/2 St. - C.
 No. of Casket 1828 Orlando 325.00
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 N S
 W
 X Grave on This Date _____
 * Cremation _____
 Urn of Sawyer's 7.15.
 * Single Grave Dayton, Tenn.
 Opening and Closing Grave _____
 Body Shipped to Dayton, Tenn.
 R. R. Ticket + Pullman. 118.11
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (2) 10.00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

488.11

Name of Deceased Fannie McGoffin Jones
 Date of Death January 25-1945 12:05 P.M.
 Cause of Death _____
 Place of Death Fla. Sen.
 Residence 57 E. Robinson Ave - Orlando, Fla.
 Age 23 Y'rs - Mo's 21 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Cathedral
 Date January 28 1945 3:30 P.M.
 Account Charged Mrs. Anna J. Enwright
 Address 57 E. Robinson Ave - Orlando
 Account Guaranteed Estate
 Address _____
 Embalming & dressing 35 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 - Sp. Br. O. State H.C. 200 00
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket 31 - Tampa
 Outside Box Req.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section V Lot 59
 E
 I Other Graves _____
 N  S
 X Grave on This Date _____ W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave, etc. 15 00
 Body Shipped to _____
 R. R. Ticket (2) Pullman Car 10 00
 Cash Advanced _____
 Autos (1) Family 5 00
 Telegram _____
 Minister (1) Car 5 00
 Music _____
 Casket Wagon (1) 5 00
 Physician _____
 County or City Burial _____
 Automobiles S. & S. 15 00
 Baggage or Express Train No. _____

290.00

Name of Deceased John Lumley Nichols
 Date of Death January 25-1945 M.
 Cause of Death Not given on permit
 Place of Death St. Petersburg
 Residence St. Petersburg, Florida
 Age 64 Y'rs 1 Mo's 20 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at St. Petersburg
 Date _____ 194 _____ M.
 Account Charged Cash
 Address St. Petersburg, Florida
 Account Guaranteed Check
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 N _____ S _____
 X Grave on This Date _____ W _____
 Cremation Body Cremated 1/28/45 37.50
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Carey Hand Funeral Home

Name of Deceased	Della Doyle		
Date of Death	January 25-1945	M.	
Cause of Death			
Place of Death	Residence		
Residence	227 Morse Blvd. - Winter Park		
Age	85	Y'rs	11
		Mo's	16
		Days	
Weight		Height	
		ft.	in.
Eyes			
Funeral at	Chapel		
Date	January 27	1945	4:20 P.M.
Account Charged	Miss Betty Doyle		
Address	343 Fairbank Ave. - Winter Park		
Account Guaranteed	Estate		
Address			
Embalming & Dressing			35.00
Robe, Suit, Dress			
Underwear and Hose			
Casket	6/3 Lil. Emb. Plush		
Casket with Copper Lin.			
Style of Casket	1/2 C.		
No. of Casket	1525 Tampa		225.00
Outside Box	Reg.		
Shipping Case or Vault			
Handles			
Pillow Set			
Name Plate			
Cemetery			
Section		Lot	
		E	
I Other Graves			
	N		S
X Grave on This Date		W	
Cremation			
Urn			
Single Grave			
Opening and Closing Grave, etc.			15.00
Body Shipped to			
R. R. Ticket			
Cash Advanced			
Autos	(1) Family Car		5.00
Telegram			
Minister			
Music			
Casket Wagon	(1)		5.00
Physician			
County or City Burial			
Automobiles	S. & S.		15.00
Baggage or Express Train No.			

300.00

Carey Hand Funeral Home

Name of Deceased Jessie M. Culloch Bruce
 Date of Death January 26-1945 8:20 A. M.
 Cause of Death _____
 Place of Death Residence
 Residence 3300 E. Colonial Dr. Orlando
 Age 68 Y'rs 9 Mo's 16 Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Destination
 Date January 27 1945 2:10 A. M.
 Account Charged Peter Bruce
 Address 3300 E. Colonial Dr. Orlando, Fla.
 Account Guaranteed Cash
 Address _____
 Embalming + Dressing 35 00
 Robe, Suit, Dress _____
 Underwear and Hose slip 2 00
 Casket 4/3 State's - In. Br. Cl.
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket 7-48- Tampa 300 00
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 N S
 X Grave on This Date _____ W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Pittsburg, Pennsylvania
 R. R. Ticket + Pullman 91 80
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (2) 10 00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

438.80

Carey Hand Funeral Home

Name of Deceased Minerva Baer Weidner
 Date of Death January 26-1945 M.
 Cause of Death Not given on permit
 Place of Death Mount Dora
 Residence Mount Dora, Florida
 Age 58 Y'rs 1 Mo's 14 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M.
 Account Charged Rehman Funeral Home
 Address Mount Dora, Florida
 Account Guaranteed Check
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves
 N S

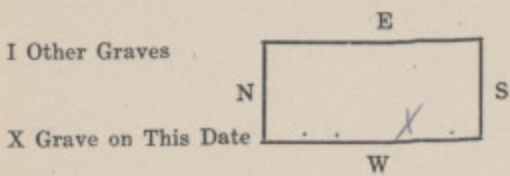
 X Grave on This Date
 W

 Cremation Body Cremated 1/27/45 37.50
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Name of Deceased Katie Rolfe Mickler
Date of Death January 26-1945 5:10 P. M.
Cause of Death Cerebral Hemorrhage
Place of Death O. H. #
Residence 808 Anderson St. - Orlando, Fla.
Age 62 Y'rs 4 Mo's 12 Days
Weight _____ Height _____ ft. _____ in. Eyes _____
Funeral at St. James Catholic Church
Date January 29 1945 9 A. M.
Account Charged A. P. Mickler
Address 808 Anderson St. - Orlando, Fla.
Account Guaranteed Estate
Address _____

Embalming + dressing 35.00
Robe, Suit, Dress _____
Underwear and Hose _____
Casket 6/3 Sil. Emb. Pl.
Casket with Copper Lin. _____
Style of Casket 1/2 Couch Oct. H.C. 225.00
No. of Casket 7-1575 - Tampa
Outside Box Reg.
Shipping Case or Vault _____
Handles _____
Pillow Set _____
Name Plate _____
Cemetery Greenwood
Section N 5 1/2 Lot 27



Cremation 3 Photos 10.50
Urn _____
Single Grave _____
Opening and Closing Grave, etc. 15.00
Body Shipped to _____
R. R. Ticket (1) Pullman Car 5.00
Cash Advanced _____
Autos (1) Family Car 5.00
Telegram _____
Minister (1) Car 5.00
Music _____
Casket Wagon (1) 5.00
Physician _____
County or City Burial _____
Automobiles S. & S. 15.00
Baggage or Express Train No. _____

320.50

Name of Deceased Charles A. Pittenger
 Date of Death January 26, 1945 M.
 Cause of Death Not given on permit
 Place of Death New Smyrna Beach
 Residence New Smyrna Beach, Florida
 Age 25 Y'rs 30 Mo's 3 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M.
 Account Charged Settle Funeral Home
 Address New Smyrna Beach, Florida
 Account Guaranteed Check
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 N S
 W
 X Grave on This Date _____
 Cremation Body Cremated 1/26/45 3750
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37.50

Name of Deceased Edrie Lynn Mitchell
 Date of Death January 26, 1945 9 P. M.
 Cause of Death Intercerebral
 Place of Death D. H.
 Residence 12138 Parkmore - Orlando, Fla.
 Age 2 Y'rs 7 Mo's 6 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Plant City, Florida
 Date January 28 1945 1:15 P.M.
 Account Charged Wm. M. Mitchell
 Address 12138 Parkmore - Orlando, Fla.
 Account Guaranteed Insurance
 Address _____
 Embalming + Dressing 25.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 76 White Lamb Skin
 Casket with Copper Lin. _____
 Style of Casket Large Full view
 No. of Casket 103 - Tampa 50.00
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 N S
 X Grave on This Date _____ W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket Express to Plant City 4.76
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

84.76

Carey Hand Funeral Home

Name of Deceased Mary Elizabeth Murwen
 Date of Death January 27-1945 6:00 P.M.
 Cause of Death Starvation
 Place of Death Cast. Sept.
 Residence Ocala, Florida
 Age Yrs 1 Mo's 19 Days
 Weight Height ft. in. Eyes
 Funeral at Granside
 Date January 27 1945 4 P.M.
 Account Charged M. E. Murwen
 Address Ocala, Florida
 Account Guaranteed Cash
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket 2/0 white Larch
 Casket with Copper Lin.
 Style of Casket
 No. of Casket 27- Tampa 20.00
 Outside Box Reg.
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery Ocala
 Section Lot
 E
 I Other Graves
 N S
 X Grave on This Date W
 Cremation
 Urn
 Single Grave
 Opening and Closing Grave
 Body Shipped to
 R. R. Ticket
 Cash Advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon
 Physician
 County or City Burial
 Automobiles
 Baggage or Express Train No.

20.00

Carey Hand Funeral Home

Name of Deceased George Wallace Beatty
 Date of Death January 27-1945 - 1:27 P.M.
 Cause of Death Carcinoma of Prostate
 Place of Death C.H.
 Residence Warwick, Rhode Island
 Age 73 Y'rs 11 Mo's 18 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Catholic Church
 Date January 30 1945 10 A.M.
 Account Charged Mrs. Marquette Beatty
 Address 525 Anderson St. Orlando, Fla
 Account Guaranteed Insurance
 Address _____

Embalming + Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Br. B. C. H. C.
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket 39 - Tampa 240.00
 Outside Box _____
 Shipping Case or Vault Cement 60.00
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section 5 1/2 27-Block 14 Lot 3 75.00

E

I Other Graves

N

S

X Grave on This Date

W

Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc. 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos (1) Pullman Car 5.00
 Telegram (1) Family Car 5.00
 Minister (1) Car 5.00
 Music _____
 Casket Wagon (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles S + S 15.00
 Baggage or Express Train No. _____

460.00

Carey Hand Funeral Home

Name of Deceased Refus B. Farnen
 Date of Death January 28-1945 7 A. M.
 Cause of Death Chro Myocarditis
 Place of Death O.H.H.
 Residence 705-26th St. - Orlando, Fla.
 Age 78 Y'rs 9 Mo's 3 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date January 30 1945 2 P. M.
 Account Charged Mrs. Refus B. Farnen
 Address 205-26th St. - Orlando, Fla.
 Account Guaranteed Estate
 Address _____
 Embalming + dressing 35.00
 Robe, Suit, Dress Blue Suit 12.00
 Underwear and Hose _____
 Casket 6/3 Oct. H.C. Lt. Gr.
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket 1922 - Tampa 135.00
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section Single Lot _____
 E
 I Other Graves _____
 N _____ S _____
 X Grave on This Date _____ W _____
 Cremation _____
 Urn _____
 Single Grave ☒ 25.00
 Opening and Closing Grave, etc. 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister (1) Per 5.00
 Music _____
 Casket Wagon (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles S & S. 15.00
 Baggage or Express Train No. _____

247.00

Name of Deceased Charles Griffin Rogers
 Date of Death January 28 - 1945 1 P.M.
 Cause of Death Pneumonia - Chronic
 Place of Death County Home Hospital
 Residence 44.5 Box 50 - Orlando, Fla
 Age 27 Y'rs 3 Mo's 9 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date January 31 1945 10 A.M.
 Account Charged H.R. Rogers
 Address 20 Holmes St. - N.W. - Atlanta, Ga.
 Account Guaranteed Check + payments
 Address _____
 Embalming + Dressing 35.00
 Robe, Suit, Dress Blue Sedge Suit 12.00
 Underwear and Hose ✓ .50
 Casket 6/3 Grey B. Cl. Cot. H.C.
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket 1850 Tampa 150.00
 Outside Box _____
 Shipping Case or Vault Cement 60.00
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section 8 Lot 155
 E
 I Other Graves _____
 N X S
 W
 X Grave on This Date _____
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc. 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister Music 2.50
 Music _____
 Casket Wagon (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles Set S 15.00
 Baggage or Express Train No. _____

295.00

Carey Hand Funeral Home

Name of Deceased Henry Triffin Sligh, Sr.
 Date of Death January 28-1945 11:45 A.M.
 Cause of Death Decapitated Heart
 Place of Death Residence
 Residence 1900 S. Division - Orlando, Fla.
 Age 76 Y'rs - Mo's 14 Days -
 Weight - Height - ft. - in. Eyes -
 Funeral at Chapel
 Date January 30 1945 4 P. M.
 Account Charged Mrs. James Sligh
 Address 1900 S. Division - Orlando, Fla.
 Account Guaranteed Estate
 Address -
 Embalming + dressing 35.00
 Robe, Suit, Dress Blue Suit 12.00
 Underwear and Hose -
 Casket 4/3 Bu. Br. Cl. S.C.
 Casket with Copper Lin. -
 Style of Casket -
 No. of Casket 1850 Tampa 150.00
 Outside Box -
 Shipping Case or Vault Cement 60.00
 Handles -
 Pillow Set -
 Name Plate -
 Cemetery Greenwood
 Section - Lot -
 E
 I Other Graves -
 N - S -
 X Grave on This Date - W -
 Cremation -
 Urn -
 Single Grave -
 Opening and Closing Grave, etc. 15.00
 Body Shipped to -
 R. R. Ticket -
 Cash Advanced -
 Autos (1) Family Car 5.00
 Telegram -
 Minister (1) Minister - Bellamy Car 5.00
 Music -
 Casket Wagon (1) 5.00
 Physician -
 County or City Burial -
 Automobiles 5.00 15.00
 Baggage or Express Train No. -

302.00

Carey Hand Funeral Home

Name of Deceased Charles Frank Fusher
 Date of Death January 29-1945 M.
 Cause of Death Not given on permit
 Place of Death Leesburg
 Residence Leesburg, Florida
 Age 65 Y'rs 9 Mo's — Days —
 Weight — Height — ft. — in. Eyes —
 Funeral at Mount Dora, Fla.
 Date — 194 — M.
 Account Charged Rehmann & Co.
 Address Mount Dora, Florida
 Account Guaranteed Check
 Address —

Embalming —
 Robe, Suit, Dress —
 Underwear and Hose —
 Casket —
 Casket with Copper Lin. —
 Style of Casket —
 No. of Casket —
 Outside Box —
 Shipping Case or Vault —
 Handles —
 Pillow Set —
 Name Plate —
 Cemetery —
 Section — Lot —

I Other Graves

N

E

S

X Grave on This Date

W

Cremation —
 Urn —
 Single Grave —
 Opening and Closing Grave —
 Body Shipped to —
 R. R. Ticket —
 Cash Advanced —
 Autos —
 Telegram —
 Minister —
 Music —
 Casket Wagon —
 Physician —
 County or City Burial —
 Automobiles —
 Baggage or Express Train No. —

37.50

37.50

Carey Hand Funeral Home

Name of Deceased John Wesley Pace
 Date of Death January 29-1945 7 P. M.
 Cause of Death Acute Cardiac dilation
 Place of Death Fla. Spr.
 Residence Pt. 5-Box 34-Orlando, Fla.
 Age 62 Y'rs 1 Mo's 7 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Pinecastle Baptist Church
 Date February 2 1945 4 P. M.
 Account Charged Bro. Lula W. Pace
 Address Pt. 5-Box 34-Orlando, Fla.
 Account Guaranteed Estate
 Address _____

Embalming & dressing	35 00
Robe, Suit, Dress	
Underwear and Hose	
Casket <u>6/3 Gv. Br. Cl.</u>	
Casket with Copper Lin.	
Style of Casket <u>1/2 Couch</u>	
No. of Casket <u>7-250 Tampa</u>	360 00
Outside Box	
Shipping Case or Vault <u>Cement</u>	60 00
Handles	
Pillow Set	
Name Plate	
Cemetery <u>Greenwood</u>	
Section <u>I</u>	Lot <u>29</u>

I Other Graves

N

E

S

X Grave on This Date

W

Cremation

Urn

Single Grave

Opening and Closing Grave etc.

Body Shipped to

R. R. Ticket

Cash Advanced

Autos (2) Family Cars

Telegram (2) Pallbearers Cars

Minister (1) Car

Music

Casket Wagon (1)

Physician

County or City Burial

Automobiles S & S.

Baggage or Express Train No.

15 00

10 00

10 00

5 00

5 00

15 00

515.00

Carey Hand Funeral Home

Name of Deceased George Gabriel Jacobs
 Date of Death January 30, 1945 1:30 P. M.
 Cause of Death Fractured skull
 Place of Death Chuluota, Fla.
 Residence Chuluota, Fla.
 Age 63 Y'rs 3 Mo's 19 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Baptist Church - Chuluota
 Date February 4 1945 2 P. M.
 Account Charged Mrs. Anne Jacobs
 Address Chuluota, Florida
 Account Guaranteed Estate
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Leek Sil. Fin.
 Casket with Copper Lin. _____
 Style of Casket State 1/2 view sealed 850.00
 No. of Casket Jango
 Outside Box _____
 Shipping Case or Vault Cement 60.00
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Chuluota Cemetery
 Section _____ Lot _____
 E
 I Other Graves _____
 N S
 X Grave on This Date _____
 W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc. 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos (1) 5.00
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (1) Go-Self 10.00
 Physician _____
 County or City Burial _____
 Automobiles S. & S. 15.00
 Baggage or Express Train No. _____

990.00

Carey Hand Funeral Home

Name of Deceased Charles W. Church
 Date of Death January 30-1945 5:30 P. M.
 Cause of Death Hypertensive Heart Disease
 Place of Death County Home
 Residence Box 506 Orlando, Fla
 Age 62 Y'rs 9 Mo's 13 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Graveside
 Date February 2 1945 noon M.
 Account Charged County
 Address _____
 Account Guaranteed County
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 4/3 Coffin
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery County Home Cemetery
 Section _____ Lot _____

I Other Graves

N

E

S

X Grave on This Date

W

Cremation _____

Urn _____

Single Grave _____

Opening and Closing Grave _____

Body Shipped to _____

R. R. Ticket _____

Cash Advanced _____

Autos _____

Telegram _____

Minister _____

Music _____

Casket Wagon _____

Physician _____

County or City Burial _____

Automobiles _____

Baggage or Express Train No. _____

14.50

14.50

Carey Hand Funeral Home

Name of Deceased John Hessler Carpenter, Jr.
 Date of Death January 31-1945 1 P. M.
 Cause of Death Still Born
 Place of Death Fla. San.
 Residence P.O. Box 186- Pinecastle
 Age - Y'rs - Mo's - Days -
 Weight - Height - ft. - in. Eyes -
 Funeral at Shadeside
 Date January 31 1945 4 P. M.
 Account Charged Mrs. C. D. Martin
 Address Pinecastle, Fla.
 Account Guaranteed Parents
 Address -
 Embalming -
 Robe, Suit, Dress -
 Underwear and Hose -
 Casket 2/0 white Spr. H. C.
 Casket with Copper Lin. -
 Style of Casket -
 No. of Casket -
 Outside Box Reg.
 Shipping Case or Vault -
 Handles -
 Pillow Set -
 Name Plate -
 Cemetery Woodlawn
 Section - Lot -
 E
 I Other Graves -
 N - S -
 X Grave on This Date -
 W
 Cremation -
 Urn -
 Single Grave -
 Opening and Closing Grave etc.
 Body Shipped to -
 R. R. Ticket -
 Cash Advanced -
 Autos (1)
 Telegram -
 Minister -
 Music -
 Casket Wagon -
 Physician -
 County or City Burial -
 Automobiles -
 Baggage or Express Train No. -

20.00

4.50

5.00

29.50

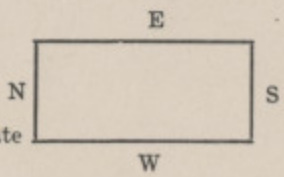
Carey Hand Funeral Home

Name of Deceased David Allen Wilkey
Date of Death January 31-1945 5 P.M.
Cause of Death Asphyxia due to mucous Plug
Place of Death P. A. H.
Residence Lockhart, Fla.
Age Y'rs Mo's Days
Weight Height ft. in. Eyes
Funeral at Haneside
Date February 1 1945 10:30 P.M.
Account Charged David A. Wilkey
Address Lockhart, Fla.
Account Guaranteed
Address

Embalming
Robe, Suit, Dress
Underwear and Hose
Casket 2 1/2 white Lambdin
Casket with Copper Lin.
Style of Casket Oct. H.C.
No. of Casket
Outside Box Reg.
Shipping Case or Vault
Handles
Pillow Set
Name Plate
Cemetery Lake Hill Cemetery
Section Lot

23 50

I Other Graves



X Grave on This Date

Cremation
Urn
Single Grave
Opening and Closing Grave etc.
Body Shipped to
R. R. Ticket
Cash Advanced
Autos (1)
Telegram
Minister
Music
Casket Wagon (1)
Physician
County or City Burial
Automobiles
Baggage or Express Train No.

5 00

5 00

5 00

38.50

Carey Hand Funeral Home

Name of Deceased George Boddie Gatling
 Date of Death January 31-1945 7:30 A.M.
 Cause of Death Bronch. Pneumonia
 Place of Death Fla. San.
 Residence 2401 Helen St. Orlando, Fla
 Age 69 Y'rs 2 Mo's 17 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date February 8 1945 11 A.M.
 Account Charged Mrs. Ruth S. Gatling
 Address 2401 Helen St. - Orlando, Fla
 Account Guaranteed Insurance
 Address _____
 Embalming + dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Steel Br. Cl.
 Casket with Copper Lin. _____
 Style of Casket state N.C.
 No. of Casket 7-31-Yampa 175.00
 Outside Box Bag.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves N S
 X Grave on This Date W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Raleigh, N.C.
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (2) 10.00
 Physician _____
 County or City Burial _____
 Automobiles Cad. Healey to Mrs. 10.00
 Baggage or Express Train No. _____

230.00

Carey Hand Funeral Home

Name of Deceased Jessie B. Morris
 Date of Death January 31-1945 M.
 Cause of Death Carcinoma
 Place of Death Tampa, Fla.
 Residence Tampa, Fla.
 Age 49 Y'rs Mo's Days
 Weight Height ft. in. Eyes
 Funeral at Chapel
 Date February 1 1945 3 P. M.
 Account Charged
 Address
 Account Guaranteed
 Address
 Embalming
 Robe, Suit, Dress
 Underwear and Hose
 Casket
 Casket with Copper Lin.
 Style of Casket
 No. of Casket
 Outside Box
 Shipping Case or Vault
 Handles
 Pillow Set
 Name Plate
 Cemetery
 Section Lot
 E
 I Other Graves
 N S
 X Grave on This Date
 W
 Cremation
 Urn
 Single Grave
 Opening and Closing Grave etc.
 Body Shipped to
 R. R. Ticket
 Cash Advanced
 Autos
 Telegram
 Minister
 Music
 Casket Wagon (1)
 Physician
 County or City Burial
 Automobiles S. & S.
 Baggage or Express Train No.

15.00

5.00

15.00

35.00

Carey Hand Funeral Home

Name of Deceased Chyle D. Gray
 Date of Death January 31-1945 9:45 A. M.
 Cause of Death Blauematic heart disease
 Place of Death Residence
 Residence 1016 N. Fernbank - Orlando, Fla.
 Age 51 Y'rs 2 Mo's 22 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date February 3 1945 11 A. M.
 Account Charged Mrs. Mildred A. Gray
 Address 1016 N. Fernbank - Orlando, Fla.
 Account Guaranteed Estate + Gov. Allowance
 Address _____
 Embalming + dressing 35 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Dark Oak
 Casket with Copper Lin. _____
 Style of Casket State 1/2 C
 No. of Casket 119 - Tampa 385 00
 Outside Box Reg
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section J Lot 105
 I Other Graves _____
 X Grave on This Date _____
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc. 15 00
 Body Shipped to _____
 R. R. Ticket (1) Family Car 5 00
 Cash Advanced _____
 Autos (1) Pullman Car 5 00
 Telegram _____
 Minister (1) Minister Car 5 00
 Music _____
 Casket Wagon (1) 5 00
 Physician _____
 County or City Burial _____
 Automobiles S. & S. 15 00
 Baggage or Express Train No. _____

470.00

Carey Hand Funeral Home

Name of Deceased	Florice L. Harrell		
Date of Death	February 1-1945	2:30 P. M.	
Cause of Death	Purulent Bronchitis		
Place of Death	O. H. H.		
Residence	502 S. Hughes St. - Orlando, Fla.		
Age	64	Y'rs	3
		Mo's	26
		Days	
Weight		Height	
		ft.	
		in.	
Eyes			
Funeral at	Greenside		
Date	February 4	1945	1 P. M.
Account Charged	Charles Harrell		
Address	502 S. Hughes St. - Orlando, Fla.		
Account Guaranteed	Cash		
Address			
Embalming + Dressing			35.00
Robe, Suit, Dress	white		7.50
Underwear and Hose			
Casket	6/8 Sh. Cl. Coct. N.E.		
Casket with Copper Lin.			
Style of Casket			
No. of Casket	7-1850 - Tampa		185.00
Outside Box	Req.		
Shipping Case or Vault			
Handles			
Pillow Set			
Name Plate			
Cemetery	Chulista Cemetery		
Section		Lot	
		E	
I Other Graves			
	N		S
X Grave on This Date		W	
Cremation			
Urn			
Single Grave			
Opening and Closing Grave	etc.		15.00
Body Shipped to			
R. R. Ticket			
Cash Advanced			
Autos			
Telegram			
Minister			
Music			
Casket Wagon	(1)		5.00
Physician			
County or City Burial			
Automobiles	S. & S.		15.00
Baggage or Express Train No.			
			262.50

Carey Hand Funeral Home

Name of Deceased	Mathie J. Joiner		
Date of Death	February 2, 1945	10:20 P. M.	
Cause of Death	Hypostatic Pneumonia		
Place of Death	Osteopathic Hospital		
Residence	P.O. Winter Garden, Florida		
Age	68 Yrs	11 Mo's	15 Days
Weight		Height	
		ft.	in.
Eyes			
Funeral at	Tranesside		
Date	February 5	1945	4:00 P. M.
Account Charged	Ada L. Joiner		
Address	Winter Garden, Florida		
Account Guaranteed			
Address			
Embalming	+ dressing		35.00
Robe, Suit, Dress	White Velvet Robe		20.00
Underwear and Hose			
Casket	6/3 Orchid Plush		
Casket with Copper Lin.			
Style of Casket	Ext. 1/2 C.		
No. of Casket	7-1575 Tampa		250.00
Outside Box			
Shipping Case or Vault	Cement		60.00
Handles			
Pillow Set			
Name Plate			
Cemetery	Berksh Cemetery		
Section		Lot	
		E	
I Other Graves			
	N		S
X Grave on This Date			
		W	
Cremation			
Urn			
Single Grave			
Opening and Closing Grave	etc.		15.00
Body Shipped to			
R. R. Ticket			
Cash Advanced			
Autos			
Telegram			
Minister			
Music			
Casket Wagon	(1)		5.00
Physician			
County or City Burial			
Automobiles	S + S		15.00
Baggage or Express Train No.			

400.00

Carey Hand Funeral Home

Name of Deceased Infant Bentley
 Date of Death February 3-1945 6 A. M.
 Cause of Death Anencephalic
 Place of Death D. H. H.
 Residence 636 N. Thornton St. - Orlando, Fla.
 Age Y's Mo's Days
 Weight Height ft. in. Eyes
 Funeral at No Service
 Date 194 M.

Account Charged

Address

Account Guaranteed

Address

Embalming

Robe, Suit, Dress

Underwear and Hose

Casket

Casket with Copper Lin.

Style of Casket

No. of Casket

Outside Box

Shipping Case or Vault

Handles

Pillow Set

Name Plate

Cemetery

Section Lot

 E

I Other Graves

 N S

 W

X Grave on This Date

Cremation Body Cremated - 2/3/45 10 00

Urn

Single Grave

Opening and Closing Grave

Body Shipped to

R. R. Ticket

Cash Advanced

Autos

Telegram

Minister

Music

Casket Wagon

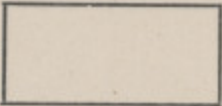
Physician

County or City Burial

Automobiles

Baggage or Express Train No.

Carey Hand Funeral Home

Name of Deceased Ans C. Knudson
 Date of Death February 3-1945 7:40 A. M.
 Cause of Death Cancer of esophagus
 Place of Death Pinecastle
 Residence Pinecastle-Florida
 Age 64 Y'rs 2 Mo's 16 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date February 5 1945 4:30 P. M.
 Account Charged Mrs. Willie K. Knudson
 Address Pinecastle, Florida
 Account Guaranteed Insurance
 Address _____
 Embalming + dressing 35 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Dr. Br. el.
 Casket with Copper Lin. _____
 Style of Casket State D. C.
 No. of Casket 31 - Tampa 200 00
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Oak Ridge Cemetery
 Section _____ Lot _____
 E
 I Other Graves _____
 N  S
 X Grave on This Date _____ W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc. 15 00
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos (1) family 5 00
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (1) 5 00
 Physician _____
 County or City Burial _____
 Automobiles S. & S 15 00
 Baggage or Express Train No. _____

272.00

Carey Hand Funeral Home

Name of Deceased Mary E. Grimes
 Date of Death February 3-1945 1:18 P. M.
 Cause of Death Chronic Infection both Kidneys
 Place of Death A. F. & A. C. Hospital
 Residence 3206 Fairway Ave. - Orlando, Fla.
 Age 34 Y'rs 11 Mo's 23 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Destination
 Date Shipped February 5 1945 2:18 P. M.
 Account Charged Capt. John Grimes
 Address 3206 Fairway Ave. - Orlando, Fla.
 Account Guaranteed Estate
 Address _____
 Embalming + dressing 35.00
 Robe, Suit, Dress + Velvet jacket 22.50
 Underwear and Hose _____
 Casket 6/3 Walnut Finish
 Casket with Copper Lin. _____
 Style of Casket state & c. 450.00
 No. of Casket _____
 Outside Box Req.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Providence, R. I.
 Section _____ Lot _____
 E
 I Other Graves _____
 N S
 X Grave on This Date _____
 W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Providence, R. I.
 R. R. Ticket Bought direct
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (2) 10.00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

517.50

Carey Hand Funeral Home

Name of Deceased Clarence W. Varner
 Date of Death February 3-1945 11:20 P. M.
 Cause of Death Acute Cerebral Apoplexy
 Place of Death Fla. San.
 Residence South Orange, New Jersey
 Age 47 Y'rs 10 Mo's - Days -
 Weight - Height - ft. - in. Eyes -
 Funeral at Destination
 Date Shipped February 4 1945 M.
 Account Charged Mrs. Clarence W. Varner
 Address South Orange, New Jersey
 Account Guaranteed Estate
 Address (also Richard J. Bundy)
 Embalming adressing 35.00
 Robe, Suit, Dress -
 Underwear and Hose -
 Casket 6/3 Mahogany
 Casket with Copper Lin. -
 Style of Casket State H. C.
 No. of Casket Tampa 400 50.00
 Outside Box Reg.
 Shipping Case or Vault -
 Handles -
 Pillow Set -
 Name Plate -
 Cemetery -
 Section - Lot -
 E
 I Other Graves -
 N - S -
 X Grave on This Date - W -
 Cremation -
 Urn -
 Single Grave -
 Opening and Closing Grave -
 Body Shipped to Newark, N. J.
 R. R. Ticket -
 Cash Advanced -
 Autos -
 Telegram (2) Certified Copies 1.00
 Minister -
 Music -
 Casket Wagon (2) 10.00
 Physician -
 County or City Burial -
 Automobiles -
 Baggage or Express Train No. -

546.00

Carey Hand Funeral Home

Name of Deceased Randall Neal
 Date of Death February 5-1945 5:15 A. M.
 Cause of Death Tuberculosis of the lungs
 Place of Death Fla. State J. R. San.
 Residence Orlando, Florida
 Age 39 Y'rs 8 Mo's 24 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Destination
 Date Shipped February 7 1945 2:15 P. M.
 Account Charged R. J. Livingston
 Address Orlando, Florida
 Account Guaranteed Insurance
 Address _____
 Embalming + dressing
 Robe, Suit, Dress Blue Serge
 Underwear and Hose _____
 Casket 6/3 Dr. Doe
 Casket with Copper Lin. _____
 Style of Casket Oct. H. C.
 No. of Casket Tempo 1922
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 N S
 X Grave on This Date _____ W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Crestview, Fla.
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (2)
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

35.00
17.50

135.00

37.19

10.00

236.19

Carey Hand Funeral Home

Name of Deceased Infant Duke
 Date of Death February 5-1945 M.
 Cause of Death Born dead - deformed
 Place of Death Fla. San.
 Residence 19 Pershing Pl. - Orlando, Fla.
 Age — Y'rs — Mo's — Days —
 Weight — Height — ft. — in. Eyes —
 Funeral at No Service
 Date — 194 — M.
 Account Charged David C. Duke
 Address 19 Pershing Pl. Orlando, Fla.
 Account Guaranteed Cash
 Address —
 Embalming —
 Robe, Suit, Dress —
 Underwear and Hose —
 Casket —
 Casket with Copper Lin. —
 Style of Casket —
 No. of Casket —
 Outside Box —
 Shipping Case or Vault —
 Handles —
 Pillow Set —
 Name Plate —
 Cemetery —
 Section — Lot —
 E
 I Other Graves —
 N — S —
 X Grave on This Date — W —
 Cremation Body Cremated 2/7/45 10 00
 Urn —
 Single Grave —
 Opening and Closing Grave —
 Body Shipped to —
 R. R. Ticket —
 Cash Advanced —
 Autos —
 Telegram —
 Minister —
 Music —
 Casket Wagon —
 Physician —
 County or City Burial —
 Automobiles —
 Baggage or Express Train No. — 10. 00

Name of Deceased William Booth Benson
 Date of Death February 5-1945 5:30 P.M.
 Cause of Death not given on permit
 Place of Death Eustis
 Residence Eustis, Florida
 Age 56 Y'rs 6 Mo's — Days —
 Weight — Height — ft. — in. Eyes —
 Funeral at —
 Date — 194 — M.
 Account Charged Zeller & Rebbeaux
 Address Eustis, Florida
 Account Guaranteed —
 Address —
 Embalming —
 Robe, Suit, Dress —
 Underwear and Hose —
 Casket —
 Casket with Copper Lin. —
 Style of Casket —
 No. of Casket —
 Outside Box —
 Shipping Case or Vault —
 Handles —
 Pillow Set —
 Name Plate —
 Cemetery —
 Section — Lot —
 E
 I Other Graves —
 N — S —
 X Grave on This Date — W —
 Cremation Body Cremated 2/6/45 37.50
 Urn —
 Single Grave —
 Opening and Closing Grave —
 Body Shipped to —
 R. R. Ticket —
 Cash Advanced —
 Autos —
 Telegram —
 Minister —
 Music —
 Casket Wagon —
 Physician —
 County or City Burial —
 Automobiles —
 Baggage or Express Train No. —

37.50

Name of Deceased Latan Herbert Finley
 Date of Death February 5-1945 3:20 P. M.
 Cause of Death Cancer of lung (left)
 Place of Death O. A. H.
 Residence Pinecastle, Florida
 Age 57 Yrs 5 Mo's 23 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Pinecastle Baptist Church
 Date February 7 1945 4. P. M.
 Account Charged Charlie Finley
 Address Orlando, Fla.
 Account Guaranteed Estate
 Address _____
 Embalming & Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Steel Broadcloth
 Casket with Copper Lin. _____
 Style of Casket H. E.
 No. of Casket 1850 Tampa 150.00
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section _____ Lot _____
 E
 I Other Graves _____
 N S
 W
 X Grave on This Date _____
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc. 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos (2) 10.00
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles S. & S. 15.00
 Baggage or Express Train No. _____
230.00

Carey Hand Funeral Home

Name of Deceased Henry L. Rainey
 Date of Death February 6 - 1945 M.
 Cause of Death Coronary Thrombosis
 Place of Death D. H. S.
 Residence Noble St. - Orlando, Florida
 Age 43 Y'rs 2 Mo's 20 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Destin
 Date Shipped February 8 1945 2:15 P. M.
 Account Charged Mrs. D. L. Rainey
 Address Noble Street - Orlando, Florida
 Account Guaranteed Insurance
 Address _____
 Embalming + Dressing 35 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Br. Br. Cl.
 Casket with Copper Lin. _____
 Style of Casket 1/2 C. State
 No. of Casket 2-48 - Tampa 300 00
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 N S
 X Grave on This Date _____ W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Clarksville, Ga.
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (2) 10 00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

345 00

Carey Hand Funeral Home

Name of Deceased Gerie W. Milsted
 Date of Death February 6 - 1945 11-A.M.
 Cause of Death Coronary occlusion
 Place of Death E. I. H.
 Residence Charleston, S.C.
 Age 41 Y'rs 4 Mo's 5 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date February 8 1945 10 A.M.
 Account Charged Mrs. Mary Milsted
 Address Charleston, S.C.
 Account Guaranteed Cash
 Address _____
 Embalming & dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Steel Gr.
 Casket with Copper Lin. _____
 Style of Casket Oct. 1/2 c.
 No. of Casket 1800 - Tampa 185.00
 Outside Box _____
 Shipping Case or Vault Chest 60.00
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery Greenwood
 Section _____ Lot _____
 E
 I Other Graves _____
 X Grave on This Date _____
 W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave etc. 15.00
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister (1) Minister Par 5.00
 Music _____
 Casket Wagon (1) 5.00
 Physician _____
 County or City Burial _____
 Automobiles S. & S. 15.00
 Baggage or Express Train No.

320.00

Carey Hand Funeral Home

Name of Deceased	Alice Marie Dresen		
Date of Death	February 6-1945		M.
Cause of Death	Generalized carcinoma		
Place of Death	Residence		
Residence	530 S. Eola Dr. - Orlando, Fla.		
Age	41	Y's	7 Mo's 9 Days
Weight		Height	ft. in. Eyes
Funeral at	St. James Catholic Church		
Date	February 9	1945	9:30 A.M.
Account Charged	Mrs. Mary A. Dresen		
Address	530 S. Eola Dr. - Orlando, Fla.		
Account Guaranteed			
Address			
Embalming & dressing			35.00
Robe, Suit, Dress			
Underwear and Hose			
Casket	6/3 Br. Cloth		
Casket with Copper Lin.			
Style of Casket	Ext. H.C.		
No. of Casket	1922 - Tampa		135.00
Outside Box			
Shipping Case or Vault	Cement		60.00
Handles			
Pillow Set			
Name Plate			
Cemetery	Greenwood		
Section	M	Lot	16
		E	
I Other Graves	<div style="border: 1px solid black; width: 150px; height: 50px; position: relative; margin: 0 auto;"> N S </div>		
X Grave on This Date	February 8:00 P.M. W Feb. 7 1945 Chapel		
Cremation			
Urn			
Single Grave			
Opening and Closing Grave	etc.		15.00
Body Shipped to			
R. R. Ticket	(1) Pullman Car		5.00
Cash Advanced			
Autos	(1) Family		5.00
Telegram			
Minister	(1) Car		5.00
Music			
Casket Wagon	(1)		5.00
Physician			
County or City Burial			
Automobiles	S. & S.		15.00
Baggage or Express Train No.			
			280.00

Carey Hand Funeral Home

Name of Deceased Marvin Lorenzo Pike
 Date of Death February 7 - 1945 3 A.M.
 Cause of Death Natural Causes
 Place of Death Albee
 Residence Albee, Florida
 Age — Y'rs 1 Mo's 24 Days —
 Weight — Height — ft. — in. Eyes —
 Funeral at Graceland
 Date February 7 1945 4:30 P.M.
 Account Charged Clifford Pike
 Address Albee, Florida
 Account Guaranteed Cash
 Address —

Embalming —
 Robe, Suit, Dress —
 Underwear and Hose —
 Casket 2/0 White
 Casket with Copper Lin. —
 Style of Casket —
 No. of Casket 77 - Tampa
 Outside Box —
 Shipping Case or Vault —
 Handles —
 Pillow Set —
 Name Plate —
 Cemetery Albee Cemetery
 Section — Lot —

I Other Graves

N

E

S

X Grave on This Date

W

Cremation —
 Urn —
 Single Grave —
 Opening and Closing Grave —
 Body Shipped to —
 R. R. Ticket —
 Cash Advanced —
 Autos Family did their own
 Telegram work
 Minister —
 Music —
 Casket Wagon —
 Physician —
 County or City Burial —
 Automobiles —
 Baggage or Express Train No. —

1350

1350

Carey Hand Funeral Home

Name of Deceased William F. Quast, Jr.
 Date of Death February 7-1945 4:30 P. M.
 Cause of Death Multiple sclerosis
 Place of Death Residence
 Residence 1520 Alameda Ave. - Winter Park
 Age 36 Y'rs — Mo's 9 Days —
 Weight — Height — ft. — in. Eyes —
 Funeral at Memorial Services - Knowles Chapel
 Date February 11 194 5 4 P. M.
 Account Charged Wm F. Quast, Jr.
 Address Winter Park, Fla.
 Account Guaranteed Insurance
 Address —
 Embalming + dressing
 Robe, Suit, Dress —
 Underwear and Hose —
 Casket 6/3 Sil. Gb.
 Casket with Copper Lin. —
 Style of Casket Flay. Inl. H.C.
 No. of Casket 70 - Fresh
 Outside Box —
 Shipping Case or Vault —
 Handles —
 Pillow Set —
 Name Plate —
 Cemetery —
 Section — Lot —

I Other Graves

N

E

S

X Grave on This Date

W

Cremation Body Cremated 2/11/45
 Urn —
 Single Grave —
 Opening and Closing Grave —
 Body Shipped to —
 R. R. Ticket —
 Cash Advanced —
 Autos —
 Telegram —
 Minister —
 Music —
 Casket Wagon (1)
 Physician —
 County or City Burial —
 Automobiles —
 Baggage or Express Train No. —

35.00

90.00

50.00

5.00

180.00

Carey Hand Funeral Home

Name of Deceased Louise Cox
 Date of Death February 8-1945 2 P. M.
 Cause of Death Pulmonary Tuberculosis
 Place of Death Residence
 Residence 219 W. Concord - Orlando, Fla.
 Age 68 Y'rs - Mo's 28 Days -
 Weight - Height - ft. - in. Eyes -
 Funeral at Chapel
 Date February 12 1945 7:30 P. M.
 Account Charged Mrs. J. Cox
 Address 219 W. Concord - Orlando
 Account Guaranteed Estate
 Address -
 Embalming & dressing 35.00
 Robe, Suit, Dress white 14.00
 Underwear and Hose -
 Casket 4/3 St. G. Cl.
 Casket with Copper Lin. -
 Style of Casket Det. H. C.
 No. of Casket 1922 - Tampa 125.00
 Outside Box Reg.
 Shipping Case or Vault -
 Handles -
 Pillow Set -
 Name Plate -
 Cemetery Greenwood
 Section N 1/2 17 Blk. 14 Lot 5

I Other Graves

N

E

S

X Grave on This Date

W

Cremation

Urn

Single Grave

Opening and Closing Grave etc. 15.00

Body Shipped to

R. R. Ticket

Cash Advanced

Autos (1) Family 5.00

Telegram

Minister & Ballroom Car (1) 5.00

Music

Casket Wagon (1) 5.00

Physician

County or City Burial

Automobiles S. & S. 15.00

Baggage or Express Train No.

219.00

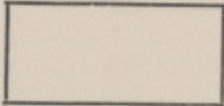
Carey Hand Funeral Home

Name of Deceased Joseph B. Riddle
 Date of Death February 7-1945 8 P. M.
 Cause of Death Surgical Shock
 Place of Death At Home - 201st
 Residence 300 E. Bay St. - Winter Garden
 Age 83 Y'rs 1 Mo's 12 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Destination
 Date Shipped - February 9 1945 8:11 P. M.
 Account Charged Mrs. M. P. Johnston
 Address Orlando, Florida
 Account Guaranteed Estate
 Address _____
 Embalming + Dressing 35 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Steel Br. Cl.
 Casket with Copper Lin. _____
 Style of Casket State H.C.
 No. of Casket 250 Tampa 325 00
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves N S
 X Grave on This Date W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Goodwater, Ala.
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (2) 10 00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____
370 00

Carey Hand Funeral Home

Name of Deceased Jerry Wilson Williams
 Date of Death February 8-1945 5 P. M.
 Cause of Death Carcinoma of prostate
 Place of Death Residence
 Residence Umatilla, Florida
 Age 73 Y'rs 4 Mo's 6 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M.
 Account Charged Zeller & Rehmann
 Address Eustis, Florida
 Account Guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 N S
 X Grave on This Date _____ W
 Cremation Body Cremated 2/9/45 37 50
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

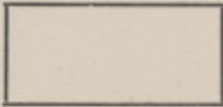
37 50

Name of Deceased Guy Kenan Hawks
 Date of Death February 11 1945 9 P. M.
 Cause of Death Acute dilatation of heart
 Place of Death Windsor
 Residence 2929 Rockwood - Toledo, Ohio
 Age 72 Y'rs 5 Mo's 24 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Destination
 Date Left February 13 1945 2:18 P. M.
 Account Charged Mrs. Gabrielle Hawks
 Address Toledo, Ohio
 Account Guaranteed Cash + Payments
 Address _____
 Embalming + Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 4/3 Bronze Finish
 Casket with Copper Lin. _____
 Style of Casket State H.C.
 No. of Casket Leak - Tampa 800.00
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 N  S
 X Grave on This Date _____ W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Toledo, Ohio
 R. R. Ticket + Pullman 91.08
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (2) 10.00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____
936.08

Carey Hand Funeral Home

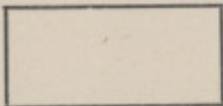
Name of Deceased William A. Knapp
 Date of Death February 11-1945 10:50 P.M.
 Cause of Death Coronary Thrombosis
 Place of Death Hotel Duellin
 Residence 407 E. 4th St. - Warren, Minn.
 Age 69 Y'rs 6 Mo's 26 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Destination
 Date Shipped February 12 1945 2:18 P.M.
 Account Charged Mrs. Synnora A. Knapp
 Address Warren, Minn.
 Account Guaranteed Check
 Address _____
 Embalming + Dressing 35.00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Enalg. Fin.
 Casket with Copper Lin. _____
 Style of Casket State 1/2 C.
 No. of Casket Cincinnati 645.00
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 N S
 X Grave on This Date _____ W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Warren, Minn.
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (2) 10.00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____
690.00

94 **Carey Hand Funeral Home**

Name of Deceased Howard H. Bundy
 Date of Death February 12-1945 12 P.M.
 Cause of Death Acute Cerebral Apoplexy
 Place of Death Fla. San.
 Residence Altamonte Springs, Fla.
 Age 29 Y'rs 5 Mo's - Days 8
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Chapel
 Date February 14 1945 2 P. M.
 Account Charged Mrs. Howard H. Bundy
 Address Altamonte Springs, Florida
 Account Guaranteed Estate
 Address _____
 Embalming + dressing 35 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Steel Br. Cote
 Casket with Copper Lin. Sealer
 Style of Casket H.C.
 No. of Casket 1850-Tampa 325 00
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery In Vault 15 00
 Section _____ Lot _____
 E
 I Other Graves _____
 N  S
 X Grave on This Date _____
 W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced 6 Certified copies 3 00
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (2) 10 00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

388 00

Carey Hand Funeral Home

Name of Deceased Martha Helen Sawyer
 Date of Death February 12-1945 M.
 Cause of Death not given on Permit
 Place of Death Residence
 Residence Winter Haven, Florida
 Age 86 Y'rs _____ Mo's _____ Days _____
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M.
 Account Charged W. H. Smith
 Address Winter Haven, Florida
 Account Guaranteed Check
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves 
 X Grave on This Date _____ W
 Cremation Cremated 2/13/45 3750
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

3750

Carey Hand Funeral Home

Name of Deceased Anna Laddy
 Date of Death February 13-1945 8:15 P.M.
 Cause of Death Coronary Thromboses
 Place of Death Residence
 Residence 431 Magnolia Ave. - Orlando, Fla.
 Age 74 Y'rs 20 Mo's 7 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Destination
 Date Shipped February 14 1945 _____ M.
 Account Charged _____
 Address _____
 Account Guaranteed Western Union Draft
 Address _____
 Embalming + dressing 35 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 - Cloth Steel Gr. H. 6
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket 1575 - Tampa 250 00
 Outside Box Req.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 N S
 X Grave on This Date _____
 W
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Sidney, New York
 R. R. Ticket Express 95 63
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (2) 10 00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____
395 00

Carey Hand Funeral Home

Name of Deceased Charles F. McLaughlin
Date of Death February 13-1945 M.
Cause of Death Coronary occlusion
Place of Death Residence
Residence Pinecastle, Florida
Age 76 Y'rs - Mo's 11 Days
Weight - Height - ft. - in. Eyes -
Funeral at Chapel
Date February 18 1945 4 P. M.
Account Charged Mr. Chas. F. McLaughlin
Address Pinecastle, Florida
Account Guaranteed Check
Address -
Embalming & Dressing - 35 00
Robe, Suit, Dress -
Underwear and Hose -
Casket 6/3 Gv. Cloth
Casket with Copper Lin. -
Style of Casket 1/2 C. State
No. of Casket 7-31 Tampa 235 00
Outside Box -
Shipping Case or Vault -
Handles -
Pillow Set -
Name Plate -
Cemetery -
Section - Lot -
E
I Other Graves -
N - S -
X Grave on This Date - W -
Cremation Body Cremated 2/19/45 50 00
Urn -
Single Grave -
Opening and Closing Grave -
Body Shipped to -
R. R. Ticket -
Cash Advanced -
Autos -
Telegram -
Minister -
Music -
Casket Wagon (1) 5 00
Physician -
County or City Burial -
Automobiles -
Baggage or Express Train No. -

325 00

Urn bought & paid for Feb. 20th - 50 00

Name of Deceased J. Fred Scholdfield
 Date of Death February 14-1945 M.
 Cause of Death Coronary Thrombosis
 Place of Death Residence
 Residence Indian River City, Florida
 Age 64 Y's 7 Mo's 4 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at _____
 Date _____ 194 _____ M.
 Account Charged J. E. Keon - Funeral Home
 Address Cocoa, Florida
 Account Guaranteed _____
 Address _____
 Embalming _____
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket _____
 Casket with Copper Lin. _____
 Style of Casket _____
 No. of Casket _____
 Outside Box _____
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves N S
 X Grave on This Date W
 Cremation Body Cremated 2/15/45 37 50
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to _____
 R. R. Ticket _____
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon _____
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

37 50

Carey Hand Funeral Home

Name of Deceased Michael H. Savath
 Date of Death February 16-1945 M.
 Cause of Death Luberina
 Place of Death D. H. S.
 Residence Mentor, Ohio
 Age 76 Y'rs 7 Mo's 5 Days
 Weight _____ Height _____ ft. _____ in. Eyes _____
 Funeral at Destination
 Date February 12 1945 M.
 Account Charged Mrs. Elizabeth Savath
 Address Mentor, Ohio
 Account Guaranteed Check
 Address _____
 Embalming + dressing 35 00
 Robe, Suit, Dress _____
 Underwear and Hose _____
 Casket 6/3 Walnut
 Casket with Copper Lin. _____
 Style of Casket State
 No. of Casket Walker-General 8 00 00
 Outside Box Reg.
 Shipping Case or Vault _____
 Handles _____
 Pillow Set _____
 Name Plate _____
 Cemetery _____
 Section _____ Lot _____
 E
 I Other Graves _____
 N _____ S _____
 X Grave on This Date _____
 W _____
 Cremation _____
 Urn _____
 Single Grave _____
 Opening and Closing Grave _____
 Body Shipped to Mentor, Ohio
 R. R. Ticket Pullman 83 13
 Cash Advanced _____
 Autos _____
 Telegram _____
 Minister _____
 Music _____
 Casket Wagon (2) 10 00
 Physician _____
 County or City Burial _____
 Automobiles _____
 Baggage or Express Train No. _____

928 13